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FAX TRANSMISSION**DATE:** March 21, 2006**PTO IDENTIFIER:** Application Number 10/533869
Patent Number**Inventor:** Peter Edman et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** FISH & NEAVE IP GROUP
ROPES & GRAY LLP
David P. Halstead, Ph.D.**PHONE:** (617) 951-7615**Attorney Dkt. #:** ASZD-P01-881**PAGES (Including Cover Sheet):** 4**CONTENTS:** Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (1 page)
Statement Under 37 CFR 3.73 (b) (1 page)
This Facsimile Cover Sheet (1 page)
Certificate of Transmission (1 page)

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PTO/SB/97 (09-04)

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Serial No. (if known): 10/533869

Attorney Docket No.: ASZD-P01-881

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on March 21, 2006
Date


SignatureMary Jane DiPalma

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Statement Under 37 CFR 3.73 (b) (1 page)
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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/533869		
	Filing Date	May 5, 2005		
	First Named Inventor	Peter Edman		
	Art Unit	1654		
	Examiner Name	Heard, Thomas Sweeney		
	Attorney Docket Number	10088# - 1P US		

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number:

OR

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City

Country State Zip

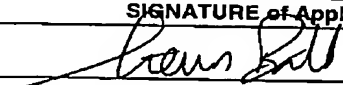
Telephone Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature 

Name

Date Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Peter Edman et al.

Application No: 10/553869

Filed: May 5, 2005

Entitled: AQUEOUS PHARMACEUTICAL FORMULATION COMPRISING THE THROMBIN INHIBITOR
MELAGATRAN AND USE OF THE FORMULATION IN THE MANUFACTURE OF A
MEDICAMENT FOR USE BY NASAL ADMINISTRATION IN TREATING THROMBOEMBOLISM

AstraZeneca AB
(Name of Assignee)

, a Corporation
(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.

The extent (by percentage) of its ownership interest is _____ %
in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 017046, Frame 0744, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
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☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.
(NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Kevin Bill
Signature

15 March 2006
Date

KEVIN BILL
Printed or Typed Name

Telephone Number

Patent Director, CV
Title: Authorized Signer for Assignee